

ARKANSAS CEMETERY BOARD

ANNUAL REPORT OF PERPETUALLY MAINTAINED CEMETERY BY ONE INDIVIDUAL TRUSTEE

JANUARY 1, 2004 THROUGH DECEMBER 31, 2004

THIS ANNUAL REPORT MUST BE FILED ON OR BEFORE MARCH 1, 2005 WITH THE ARKANSAS CEMETERY BOARD, Heritage West Building, Third Floor, 201 East Markham, Little Rock, Arkansas 72201.

NOTE: Ark. Code Ann. § 20-17-1015(c)(3) requires the Board to assess and collect from the Trustee a \$50.00 per day additional contribution to the Trust Fund for failure to timely file this report. The Board cannot waive this additional contribution.

NAME OF TRUSTEE: _____

ADDRESS OF TRUSTEE: _____

_____ ZIP _____ TELEPHONE NO. _____

NAME OF CEMETERY FOR WHICH THE TRUST FUND WAS ESTABLISHED: _____

ADDRESS OF CEMETERY: _____

_____ ZIP _____

DATE OF TRUST AGREEMENT: _____

LOCATION OF TRUSTEE'S BOOKS AND RECORDS: _____

PERSON IN CHARGE OF
BOOKS AND RECORDS: _____ TELEPHONE NO: _____

NAME AND ADDRESS
OF REPORT PREPARER: _____

_____ ZIP _____ TELEPHONE NO: _____

Attached are the following completed Schedules which reflect all Trust Fund receipts, disbursements, expenses, and other activities for the year 2004 as well as a detailed listing of all assets in the Trust Fund as of December 31, 2004

NOTE: A copy of any trustee record or document which contains the same information required in any Schedule of this report may be submitted in place of completing the Schedule. Any such trustee record or document submitted must clearly show which Schedule it is being submitted for.

SCHEDULES CHECK IF COMPLETED
SCHEDULE IS ATTACHED

Schedule "A" Trust Fund Deposits Received from the Cemetery _____

Schedule "B" Gross Income Earned on the Trust Fund and
Disbursements of Income to the Cemetery _____

Schedule "C" Expenses Paid from the Trust Fund _____

Schedule "D" Miscellaneous Additions and/or Deductions _____

Schedule "E" Principal and Undisbursed Income in the Trust Fund _____

Schedule "F" Assets in the Trust Fund _____

QUESTIONS AND INFORMATION

- (1) Has there been any change in Trustee or form of Trustee since December 31, 2003?
[☐] Yes [☐] No. If Yes, please explain: _____
- (2) Has a copy of the Trust Agreement and all amendments thereto been filed with the Arkansas Cemetery Board? [☐] Yes [☐] No
- (3) During 2004 and as of December 31, 2004, was or is any asset of the Trust Fund in any way encumbered by debt? [☐] Yes [☐] No. If Yes, please explain: _____
- (4) During 2004 and as of December 31, 2004, was or is any permitted cemetery property in any way encumbered by debt? [☐] Yes [☐] No. If Yes, please explain: _____
- (5) During 2004 were any Trust Fund monies used to make loans to the Cemetery, the Cemetery's officers, directors, partners or employees? [☐] Yes [☐] No
- (6) Where specifically (location) are the Trust Fund savings accounts and/or certificates of deposit kept? Be as specific as possible. _____

AFFIDAVIT OF TRUSTEE

STATE OF ARKANSAS }
 } ss.
COUNTY OF _____}

BEFORE ME, the undersigned authority, on this day personally appeared _____

(Trustee's Name)

known to me to be the Trustee of _____
(Name of Permanent Maintenance Trust Fund)

and being duly sworn on oath did depose and say, that the affiant has read and knows the contents of the above and foregoing report of status of permanent maintenance trust fund of said Cemetery and that the facts set forth therein are known by the affiant to be in all things true and correct.

(Trustee)

SUBSCRIBED AND SWORN TO before me on this _____ day of _____, 20_____.

Notary Public in and for

_____ County, Arkansas

My Commission Expires:

ANNUAL REPORT OF PERPETUALLY MAINTAINED CEMETERY BY ONE INDIVIDUAL TRUSTEE

SCHEDULE OF ACCOUNTING FOR GROSS INCOME EARNED ON THE TRUST FUND
AND DISBURSEMENTS OF INCOME TO THE CEMETERY

FROM JANUARY 1, 2004 THROUGH DECEMBER 31, 2004

NAME OF TRUSTEE: _____

CEMETERY FOR WHICH THE TRUST FUND WAS ESTABLISHED: _____

List the name of each bank or savings & loan with which the Trust Fund assets were deposited during the year and show the total amount of income earned and the total amount of income disbursed to the Cemetery from each bank or savings & loan. **Additionally, please attach copies of Forms 1099 or other supporting documents to verify the total income earned for the year.**

[illegible]

SCHEDULE "C"

ANNUAL REPORT OF PERPETUALLY MAINTAINED CEMETERY BY ONE INDIVIDUAL TRUSTEE

SCHEDULE OF ACCOUNTING FOR EXPENSES PAID FROM THE TRUST FUND

FROM JANUARY 1, 2004 THROUGH DECEMBER 31, 2004

NAME OF TRUSTEE: _____

CEMETERY FOR WHICH THE TRUST FUND WAS ESTABLISHED: _____

List the amount and description of each expense paid from the Trust Fund during the year.

DESCRIPTION OF EXPENSE (Bank fees, taxes, tax return preparation, etc.)	AMOUNT OF EXPENSE
	\$
TOTAL EXPENSES FOR THE YEAR	\$

ANNUAL REPORT OF PERPETUALLY MAINTAINED CEMETERY BY ONE INDIVIDUAL TRUSTEE

SCHEDULE OF ACCOUNTING FOR MISCELLANEOUS ADDITIONS TO THE TRUST FUND
AND/OR MISCELLANEOUS DEDUCTIONS FROM THE TRUST FUND

FROM JANUARY 1, 2004 THROUGH DECEMBER 31, 2004

NAME OF TRUSTEE: _____

CEMETERY FOR WHICH THE TRUST FUND WAS ESTABLISHED: _____

(1) MISCELLANEOUS ADDITIONS			
Description of Addition *	Is Addition to Principal or Income?	Date	Amount
			\$
TOTAL MISCELLANEOUS ADDITIONS			\$

(2) MISCELLANEOUS DEDUCTIONS			
Description of Deduction *	Is Deduction from Principal or Income?	Date	Amount
			\$
TOTAL MISCELLANEOUS DEDUCTIONS			\$

* Explain each Miscellaneous Addition and/or Deduction listed on this Schedule.
Note if each addition or deduction is to or from "Principal" or "Income".

ANNUAL REPORT OF PERPETUALLY MAINTAINED CEMETERY BY ONE INDIVIDUAL TRUSTEE

SCHEDULE OF ACCOUNTING FOR PRINCIPAL AND UNDISBURSED INCOME
IN THE TRUST FUND AS OF DECEMBER 31, 2004

NAME OF TRUSTEE: _____

CEMETERY FOR WHICH THE TRUST FUND WAS ESTABLISHED: _____

	PRINCIPAL	UNDISBURSED INCOME
(1) Balances of Principal and Undisbursed Income in the Trust fund as of December 31, 2003 (from Schedule "E" of the 2003 Annual Report)	\$	\$
(2) ADDITIONS FOR 2004		
A. Trust Fund Deposits Received from Cemetery (from Schedule "A", page 3)	\$	
B. Gross Income Earned on Trust Fund (from Schedule "B", page 4)		\$
C. Other Miscellaneous Additions (from Schedule "D", page 6)	\$	\$
(3) TOTAL ADDITIONS (add lines 2A thru 2C)	\$	\$
(4) SUBTOTAL (add lines 1 and 3)	\$	\$
(5) DEDUCTIONS FOR 2004		
A. Total Income Disbursements (from Schedule "B", page 4)		\$
B. Total Expenses (from Schedule "C", page 5)		\$
C. Other Miscellaneous Deductions (from Schedule "D", page 6)	\$	\$
(6) TOTAL DEDUCTIONS (add lines 5A thru 5C)	\$	\$
(7) Balances of Principal and Undisbursed Income in the Trust Fund as of December 31, 2004 (subtract line 6 from line 4)	\$	\$

NOTE: If the balance of Undisbursed Income on Line (7) is less then zero, please explain the reason for the overdisbursement of income and what has been done to correct the overdisbursement.
